

## **Application Data Sheet**

### **Application Information**

Application number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R?: None

Number of CD disks::

Number of copies of CDs::

Sequence submission?:

Computer Readable Form (CRF)?:

Number of copies of CRF::

Title:: METHOD AND APPARATUS FOR ADDRESS  
ALLOCATION IN GPRS NETWORKS THAT  
FACILITATES END-TO-END SECURITY  
005288.00014

Attorney Docket Number::

Request for Early Publication?: NO

Request for Non-Publication?: NO

Suggested Drawing Figure::

Total Drawing Sheets:: 6

Small Entity?: NO

Latin name::

Variety denomination name::

Petition included?: NO

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?: NO

## Applicant Information

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: India  
Status:: Full Capacity  
Given Name:: Senthil  
Middle Name::  
Family Name:: Sengodan  
Name Suffix::  
City of Residence:: Burlington  
State or Province of Residence:: MA  
Country of Residence:: U.S.A.  
Street of mailing address:: 26 Beacon Street #38C  
City of mailing address:: Burlington  
State or Province of mailing address:: MA  
Country of mailing address:: U.S.A.  
Postal or Zip Code of mailing address:: 01803

Applicant Authority Type:: Inventor  
Primary Citizenship Country::  
Status:: Full Capacity  
Given Name::  
Middle Name::  
Family Name::  
Name Suffix::  
City of Residence::  
State or Province of Residence::  
Country of Residence::  
Street of mailing address::  
City of mailing address::  
State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::

Applicant Authority Type:: Inventor

Primary Citizenship Country::

Status:: Full Capacity

Given Name::

Middle Name::

Family Name::

Name Suffix::

City of Residence::

State or Province of Residence::

Country of Residence::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::

### Correspondence Information

Correspondence Customer Number:: 22907

### Representative Information

Representative Customer Number:: 22907

### Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application			

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## Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::

## Assignee Information

Assignee name:: Nokia Corporation

Street of mailing address:: Keilalahdentie 4

City of mailing address::

State or Province of mailing address:: FIN-02150 ESPOO

Country of mailing address:: FINLAND

Postal or Zip Code of mailing address::